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Pepartment of the Treasury Internal Revenue Service (77

Return of Private Foundation

or Section 4947(a)(1) Nonexempt Charitable Trust
Treated as a Private Foundation

Note The foundation may be able to use a copy of this return to satisfy state reporting requirements

OMB No 1545-0052

2009

| Fo | r calendar | year 2009, or tax year beg | ginning | , a | nd ending | | | | |
|--------------------|----------------------|--|---------------------------------------|--|---------------------------|----------------|--|--|-----------|
| G | Check all | | l return | Initial return of a for Address change | • | rity me cha | Final re | eturn | |
| | se the IRS label. | Name of foundation THE MCMASTER FAMILY | FOUNDATION, | INC. | | | loyer identification nu 03-0577 | | |
| (| Otherwise, print | Number and street (or P O box r | number if mail is not de | elivered to street address) | Room/suite | B Tele | phone number (see pag | ge 10 of the instructions | 5) |
| | or type. | 215 SOUTH OCEAN GRA | NDE DRIVE | | UNIT 201 | | (904) 825 | -2110 | |
| S | ee Specific | City or town, state, and ZIP code | | | | C If exe | mption application is pi | ending, check here | \Box |
| | structions. | | | | 32082 | D 1. Fo | reign organizations, chi | eck here | |
| Н | | e of organization X Sect 947(a)(1) nonexempt charit | | mpt private foundation Other taxable private | | ch | reign organizations me eck here and attach co | mputation > | |
| 1 | of year (fro | et value of all assets at end om Part II, col (c), | J Accounting i | ecify) | | unde | ate foundation status w r section 507(b)(1)(A), of foundation is in a 60-m | check here | |
| | line 16) ▶ | \$ 827,089 | (Part I, column (d | d) must be on cash bas | is) | unde | section 507(b)(1)(B), o | check here | |
| Pa | amou | lysis of Revenue and Expons in columns (b), (c), and (d) may innounts in column (a) (see page 11 c | not necessarily equal | (a) Revenue and expenses per books | (b) Net investm income | ent | (c) Adjusted net income | (d) Disbursements for charitable purposes (cash basis only) | ; |
| | 1 Contr | butions, gifts, grants, etc , received | (attach schedule) | | | | | | |
| | 2 Check | √ If the foundation is not required. ✓ If the foundation is not | red to attach Sch B | 4 | | | | | |
| | 3 Inter | est on savings and temporary o | ash investments | 6 | | 6 | | | |
| | 4 Divid | ends and interest from securities | es | 31,671 | 31 | ,671 | | | |
| | 5 a Gros | s rents | • | | | | | 7-7-1-1-1-1-1-1 | |
| <u> </u> | b Net r | ental income or (loss) | · · · · · · · · · · · · · · · · · · · | | | | | | _ |
| J. | 6 a Net o | gain or (loss) from sale of asset | s not on line 10 | | | | | | |
| Revenue | b Gross | sales price for all assets on line 6a | | ` | | | | | |
| ď | | tal gain net income (from Part l | V, line 2) | * * | | | | | |
| | l _ | short-term capital gain | | | | +- | . <u> </u> | | <u></u> |
| | 1 | ne modifications | 1 | <u> </u> | | | | | — |
| | ! | sales less returns and allowances Cost of goods sold | | , | | | | | — |
| | l | s profit or (loss) (attach schedu | L | - | | | · · · · · · · · · · · · · · · · · · · | | |
| | l | r income (attach schedule) | 16) | | | 475 | | | — |
| | | I. Add lines 1 through 11 | | 31,677 | 31 | 2,152 | | | — |
| | | pensation of officers, directors. | trustees etc | 31,077 | | 2,152 | | | |
| Expenses | i | r employee salaries and wages | • | | | - | ·· | | |
| eus | | ion plans, employee benefits | | | | | | | |
| ğ X | | I fees (attach schedule) | | | - | | | | — |
| | _ | unting fees (attach schedule) | | 700 | | 700 | | | |
| and Administrative | 1 | r professional fees (attach sche | dule) | | | | | | |
| ā | 17 Intere | est RECEIV | ED | | | | | | _ |
| ist | 18 Taxes | (attach schedul e) (see page 14 of th | | 1,113 | 1 | ,113 | | | |
| ᆵ | 19 Depr | eciation (attach schedule) and | depletion O | | | | | | _ |
| þ | | pancy MAY 1 7 | 2010. J | · · · · · · · · · · · · · · · · · · · | | | | | |
| ▼ | | el, conferences, and meetings | <u></u> | | | | | | |
| ä | 22 Printi | ing and publication GDEN | UT | | - | | | | |
| <u>D</u> | 23 Othe | r expense (attach schodule) | | | | | | | |
| Operating | | l operating and administrative | e expenses. | , | | | | | |
| -ea | L . | ines-13-through-23 | - | 1,813 | | -813 <u> </u> | | 05.4 | |
| Ö | | ributions, gifts, grants paid | | 35,100 | | | | 35,1 | |
| _ | | expenses and disbursements. Ad | d lines 24 and 25 | 36,913 | 1 | ,813 | | 35,1 | <u>00</u> |
| | | ract line 26 from line 12 | | | | | | | |
| | | ss of revenue over expenses and | | -5,236 | | | , | ļ | — |
| | | nvestment income (if negative | | | 30 | ,339 | | | |
| | C Adju | sted net income (if negative, e | nter -0-) | | | 1 | | ł | |

| Da | rt II | Balance Sheets Attached schedules and amounts in the description column | beginning of year | Ena c | or year |
|-------------------------|--------|---|---|---------------------------------------|-----------------------|
| | | should be for end-of-year amounts only (See instructions) | (a) Book Value | (b) Book Value | (c) Fair Market Value |
| | 1 | Cash—non-interest-bearing | | · · · · · · · · · · · · · · · · · · · | |
| | 2 | Savings and temporary cash investments | 7,200 | 34,993 | 34,993 |
| | 3 | Accounts receivable | | | |
| | | Less allowance for doubtful accounts | | | |
| | 4 | Pledges receivable | 4-4 ma 11-man er enno min ca | *** | - 4 1 mm |
| | | Less allowance for doubtful accounts | | _ | |
| | 5 | Grants receivable | | . <u> </u> | |
| | 6 | Receivables due from officers, directors, trustees, and other | | | |
| | | disqualified persons (attach schedule) (see page 15 of the | | | |
| | l _ | instructions) | | ·· | |
| | 7 | Other notes and loans receivable (attach schedule) | | | |
| Assets | _ | Less allowance for doubtful accounts | | | |
| SS | 8 | Inventories for sale or use | | | |
| Ä | 9 | Prepaid expenses and deferred charges | | | - |
| | 1 | Investments—U.S. and state government obligations (attach schedule) | | | |
| | ı | Investments—corporate stock (attach schedule) | 951,880 | 915,689 | 792,096 |
| | 0 | Investments—corporate bonds (attach schedule) | | | |
| | 11 | Investments—land, buildings, and equipment basis | w. mi A ii bini ma vin n. m. m. m. m. m. m. | **** ***** * **** | 71 H70 4 Y N |
| | 1 | Less accumulated depreciation (attach schedule) | | | |
| | 12 | Investments—mortgage loans | | · · · · · · · · · · · · · · · · · · · | |
| | 13 | Investments—other (attach schedule) | | | ~ |
| | 14 | Land, buildings, and equipment basis | - (| A A *# V A | * |
| | | Less accumulated depreciation (attach schedule) | | | |
| | 15 | Other assets (describe) | | | |
| | 16 | Total assets (to be completed by all filers—see the | | | |
| | | instructions. Also, see page 1, item I) | 959,080 | 950,682 | 827,089 |
| | 17 | Accounts payable and accrued expenses | | | |
| S | 18 | Grants payable | | | |
| Liabilities | 19 | Deferred revenue | | | ę |
| ΕĠ | 20 | Loans from officers, directors, trustees, and other disqualified persons | · · · · · · · · · · · · · · · · · · · | | |
| <u>.</u> | 21 | Mortgages and other notes payable (attach schedule) | | | |
| _ | 22 | Other liabilities (describe) | | | , I |
| | 23 | Total liabilities (add lines 17 through 22) | | | |
| 40 | | Foundations that follow SFAS 117, check here | | | \$ |
| nces | | and complete lines 24 through 26 and lines 30 and 31. | | | ı |
| ž | 24 | Unrestricted | _ | | |
| ä | 25 | Temporarily restricted | | | |
| <u> </u> | 26 | Permanently restricted | | | 1 |
| Ĕ | | Foundations that do not follow SFAS 117, check here | 1 | | ¢. |
| ĭ | | and complete lines 27 through 31. | 050 000 | 050 000 | 1 |
| Net Assets or Fund Bala | 27 | Capital stock, trust principal, or current funds | 959,080 | 950,682 | , |
| įts | 28 | Paid-in or capital surplus, or land, bldg , and equipment fund | | | |
| 28 | 29 | Retained earnings, accumulated income, endowment, or other funds | | | |
| 4 | 30 | Total net assets or fund balances (see page 17 of the | 050 000 | 050 000 | |
| let | | instructions) | 959,080 | 950,682 | |
| ~ | 31 | Total liabilities and net assets/fund balances (see page 17 | 050 000 | 050.000 | |
| Da | -4.111 | of the instructions) | 959,080 | 950,682 | |
| | rt III | Analysis of Changes in Net Assets or Fund Balances net assets or fund balances at beginning of year—Part II, column (a), line | 30 (must saree with | <u> </u> | |
| | | f-year figure reported on prior year's return) | . 50 (must agree will) | | 959,080 |
| 2 | | amount from Part I, line 27a | | 2 | -5,236 |
| | | increases not included in line 2 (itemize) Dividends reinvested | | 3 | 2,075 |
| | | nes 1, 2, and 3 | | 4 | 955,919 |
| | | eases not included in line 2 (itemize) Realized Capital Losses | | 5 | 5,237 |
| | | net assets or fund balances at end of year (line 4 minus line 5)—Part II, c | olumn (b) line 30 | 6 | 950,682 |
| | · Otal | at it, could be remarked at one of year time 4 miles into 3)-1 at it, c | | | 930,002 |

| (d) Date sold (mo , day, yr) 11/9/2009 7 4/13/2009 |
|--|
| |
| |
| |
| |
| |
| |
| ain or (loss) (f) minus (g) |
| -4,891 |
| -345 |
| |
| |
| |
| of (h) gain minus |
| ot less than -0-) or (from col (h)) |
| -4,891 |
| -345 |
| |
| |
| - |
| -5,236 |
| |
| |
| |
| |
| e) |
| ·) |
| |
| Yes X No |
| |
| ng any entries |
| (d) |
| stribution ratio |
| divided by col (c)) |
| 0 052772 |
| 0 049083 |
| 0 650602 |
| |
| |
| 0 752457 |
| |
| 0 250819 |
| 714,223 |
| 179,141 |
| 303 |
| 179,444 |
| |
| 35,100 |
| |

| Рa | rt VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948—see page 18 o | f the ins | tructi | ons) |
|-----|--|-------------------|--------------|-------|
| 1 a | a Exempt operating foundations described in section 4940(d)(2), check here ▶ ☐ and enter "N/A" on line 1 〕 | | | |
| | Date of ruling or determination letter (attach copy of letter if necessary—see instructions) | | | |
| t | Domestic foundations that meet the section 4940(e) requirements in Part V, check | | 607 | |
| | here ▶ ☐ and enter 1% of Part I, line 27b | | | |
| (| All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% | | | |
| _ | of Part I, line 12, col (b) | | | |
| 2 | Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-) | | | ! |
| 3 | Add lines 1 and 2 | | 607 | |
| 4 | Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-) | | 007 | |
| 5 | Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0- | | 607 | |
| 6 | Credits/Payments | | | |
| | 2 2009 estimated tax payments and 2008 overpayment credited to 2009 6 Exempt foreign organizations—tax withheld at source 6 b | | | |
| | C Tax paid with application for extension of time to file (Form 8868) | | | |
| | Backup withholding erroneously withheld 6d | | | |
| 7 | Total credits and payments Add lines 6a through 6d | | | |
| 8 | Enter any penalty for underpayment of estimated tax. Check here | | 19 | |
| 9 | Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed | | 626 | |
| 10 | Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid | | | |
| 11 | Enter the amount of line 10 to be Credited to 2010 estimated tax ► Refunded ► 11 | | | |
| Рa | rt VII-A Statements Regarding Activities | | | |
| | During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it | | Yes | No |
| • | participate or intervene in any political campaign? | 1a | | Х |
| Ł | Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see page 19 of the | | | |
| | instructions for definition)? | 1b | | Х |
| | If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials | | | |
| | published or distributed by the foundation in connection with the activities | | | |
| (| Did the foundation file Form 1120-POL for this year? | 1c | | Х |
| c | Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year | | | |
| | (1) On the foundation \blacktriangleright \$ (2) On foundation managers \blacktriangleright \$ | | | |
| e | Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed | | | |
| | on foundation managers > \$ | | | |
| 2 | Has the foundation engaged in any activities that have not previously been reported to the IRS? | 2 | | Х |
| | If "Yes," attach a detailed description of the activities | | | |
| 3 | Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles | - | | |
| | of incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes | 3 | | X |
| | Did the foundation have unrelated business gross income of \$1,000 or more during the year? | 4a | | X |
| | o If "Yes," has it filed a tax return on Form 990-T for this year? | 4b | N/A | |
| 5 | Was there a liquidation, termination, dissolution, or substantial contraction during the year? | 5 | | Х |
| c | If "Yes," attach the statement required by General Instruction T | | | |
| 6 | Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either | | | |
| | By language in the governing instrument, or By state legislation that effectively amends the governing instrument so that no mandatory directions | | | |
| | that conflict with the state law remain in the governing instrument? | 6 | _x | |
| 7 | Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col. (c), and Part X | | x | |
| | Enter the states to which the foundation reports or with which it is registered (see page 19 of the | ` ` | <u> </u> | |
| | instructions) > FI | | | |
| ŀ | o If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney | ·- | | |
| • | General (or designate) of each state as required by General Instruction G? If "No," attach explanation | 8b | x | |
| 9 | Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) | <u> </u> | | |
| - | or 4942(j)(5) for calendar year 2009 or the taxable year beginning in 2009 (see instructions for Part XIV on page 27)? | | | |
| | If "Yes," complete Part XIV | | | _X_ |
| 10 | Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing | | | |
| | their names and addresses | 10 | | X |

| Part | VII-A Statements Regarding Activities (continued) | | | |
|----------|---|------|-------|-------------|
| 11 | At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If "Yes," attach schedule (see page 20 of the instructions) | 11 | | _ x |
| 12 | Did the foundation acquire a direct or indirect interest in any applicable insurance contract before | | | |
| | August 17, 2008? | 12 | | X |
| 13 | Did the foundation comply with the public inspection requirements for its annual returns and exemption application? | _13_ | _ X_ | |
| | Website address ► N\A | | | . |
| 14 | The books are in care of ► LEE P McMASTER Telephone no ► (904) 825-2 | 110 | | |
| | Located at ► 215 OCEAN GRANDE DRIVE, UNIT 201 PONTE VEDRA FL ZIP+4 ► 32082 | | | |
| 15 | Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041—Check here | | Þ | • 🗀 |
| | and enter the amount of tax-exempt interest received or accrued during the year | | | |
| Pai | t VII-B Statements Regarding Activities for Which Form 4720 May Be Required | | | |
| | File Form 4720 if any item is checked in the "Yes" column, unless an exception applies. | | Yes | No |
| 1a | During the year did the foundation (either directly or indirectly) | | | |
| | (1) Engage in the sale or exchange, or leasing of property with a disqualified person? Yes X No | | | , |
| | (2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) | | | 1 |
| | a disqualified person? | | | |
| | (3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? | | | |
| | (4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? Yes X No | | | 1 |
| | (5) Transfer any income or assets to a disqualified person (or make any of either available | | | |
| | for the benefit or use of a disqualified person)? | | | |
| | (6) Agree to pay money or property to a government official? (Exception. Check "No" | | | |
| | if the foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days) Yes X No | | | |
| L | | | | |
| b | If any answer is "Yes" to 1a(1)–(6), did any of the acts fail to qualify under the exceptions described in Regulations section 53 4941(d)-3 or in a current notice regarding disaster assistance (see page 20 of the instructions)? | 1b | N/A | |
| | Organizations relying on a current notice regarding disaster assistance check here | 10 | 13// | |
| С | Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, | | | 1 |
| | that were not corrected before the first day of the tax year beginning in 2009? | 1c | | X |
| 2 | Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5)) | | | |
| а | At the end of tax year 2009, did the foundation have any undistributed income (lines 6d | | | |
| | and 6e, Part XIII) for tax year(s) beginning before 2009? | | | • |
| | If "Yes," list the years 20 , 20 , 20 , 20 | | | , |
| þ | Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) | | | |
| | (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach statement—see page 20 of the instructions) | 2b | N/A | - : |
| С | If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here | 20 | 130/7 | |
| · | ► 20, 20, 20, 20 | | | |
| 3a | Did the foundation hold more than a 2% direct or indirect interest in any business | | | |
| | enterprise at any time during the year? | | | |
| b | If "Yes," did it have excess business holdings in 2009 as a result of (1) any purchase by the foundation | | | |
| | or disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approved | | | |
| | by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or (3) | | | |
| | the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine | | | |
| | if the foundation had excess business holdings in 2009) | 3b | N/A | |
| 4a | Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes? | 4a | | <u>X</u> |
| b | Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable | | | |
| | purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2009? | 4b | | X |
| | | ~ ~ | ~ ~ ~ | (2000) |

| . 511 | m 990-PF (2009) THE MCMASTER FAMILY F | OUNDATION, INC | | | <u> </u> | 03-057 | 7385 | P | age 6 |
|-----------------------|--|---|---|---------------|--|------------|----------|--|--------|
| Pa | art VII-B Statements Regarding Activiti | es for Which For | n 4720 May Be R | equired (| continued) | | | | |
| 5a | During the year did the foundation pay or incur any | y amount to | | | | | | | _ |
| | (1) Carry on propaganda, or otherwise attempt t | o influence legislation | (section 4945(e))? | | Yes | X No | | | |
| | (2) Influence the outcome of any specific public | - | 1955), or to carry | | | | | | |
| | on, directly or indirectly, any voter registratio | n drive? | | | Yes | X No | | | |
| | (3) Provide a grant to an individual for travel, stu | idy, or other similar pui | rposes? | | Yes | X No | | | |
| | (4) Provide a grant to an organization other than | a charitable, etc., org | anization described | | | | | | |
| | in section 509(a)(1) (2) or (3) or section 49 | 40(d)(2)? (see page 22 | 2 of the instructions) | | Yes | X No | | | |
| | (5) Provide for any purpose other than religious, | , charitable, scientific, I | iterary, or | | | | | | |
| | educational purposes, or for the prevention of | of cruelty to children or | animals? | | Yes | X No | | | |
| b | If any answer is "Yes" to 5a(1)-(5), did any of the | transactions fail to qua | lify under the exception | ons describe | ed in | | | | |
| | Regulations section 53 4945 or in a current notice | regarding disaster ass | istance (see page 22 | of the instru | ictions)? | | 5b | N/A | |
| | Organizations relying on a current notice regarding | disaster assistance c | heck here | | • | | | | |
| С | If the answer is "Yes" to question 5a(4), does the f | oundation claim exem | ption from the | | | _ | | | |
| | tax because it maintained expenditure responsibili | ty for the grant? | | | Yes | No | | | |
| | If "Yes," attach the statement required by Regulati | ons section 53 4945–5 | i(d) | | | | | | |
| 6a | Did the foundation, during the year, receive any fu | nds, directly or indirect | ly, to pay | | | | | | |
| | premiums on a personal benefit contract? | | | | Yes | X No | | | |
| b | Did the foundation, during the year, pay premiums | , directly or indirectly, o | on a personal benefit | contract? | | | 6b | <u> </u> | _X_ |
| | If "Yes" to 6b, file Form 8870 | | | | | | | | |
| 7a | At any time during the tax year, was the foundation | n a party to a prohibited | d tax shelter transaction | on? | Yes | X No | | | |
| | If yes, did the foundation receive any proceeds or | | | | | | 7b | | |
| P | art VIII Information About Officers | , Directors, Trusto | ees, Foundation | Manager | s, Highly | Paid Em | ploy | ees, | |
| | and Contractors | | | | | | | | |
| | List all officers, directors, trustees, found | | | | | the instru | ction | is) | |
| | (a) Name and address | (b) Title, and average hours per week | (c) Compensation (If not paid, enter | | ntributions to e benefit plans | | • | se acco | |
| | | devoted to position | -0-) | and deferr | ed compensati | on 0 | ther all | owance | s — |
| | E P McMASTER | Dir, Pres, Treas | | | | | | | |
| | 5 S OCEAN GRANDE DRIVE UNIT 201 PON | | | | | | | _ | |
| | | 5 hrs/wk | | | | | | | |
| | RETTA W McMASTER | Dır, Sec | | | | | | | |
| | RETTA W McMASTER 5 S OCEAN GRANDE DRIVE UNIT 201 PON | Dir, Sec 4 hrs/wk | | | | | | | |
| CR | RETTA W McMASTER 5 S OCEAN GRANDE DRIVE UNIT 201 PON RAIG L McMASTER | Dir, Sec 4 hrs/wk Dir, VP | | | | | | | |
| CR 21 | RETTA W McMASTER 5 S OCEAN GRANDE DRIVE UNIT 201 PON RAIG L McMASTER 5 S OCEAN GRANDE DRIVE UNIT 201 PON | Dir, Sec 4 hrs/wk Dir, VP 3 hrs/wk | | | | | | | |
| CR 21: BR | RETTA W McMASTER 5 S OCEAN GRANDE DRIVE UNIT 201 PON RAIG L McMASTER 5 S OCEAN GRANDE DRIVE UNIT 201 PON RIAN W McMASTER | Dir, Sec 4 hrs/wk Dir, VP 3 hrs/wk Dir, VP | | | | | | | |
| 21: BR 21: | RETTA W McMASTER 5 S OCEAN GRANDE DRIVE UNIT 201 PON RAIG L McMASTER 5 S OCEAN GRANDE DRIVE UNIT 201 PON RIAN W McMASTER 5 S OCEAN GRANDE DRIVE UNIT 201 PON | Dir, Sec 4 hrs/wk Dir, VP 3 hrs/wk Dir, VP 3 hrs/wk | ose included on li | ne 1—see | page 23 o | f the inst | ructio | ons). | |
| 21: BR 21: | RETTA W McMASTER 5 S OCEAN GRANDE DRIVE UNIT 201 PON RAIG L McMASTER 5 S OCEAN GRANDE DRIVE UNIT 201 PON RIAN W McMASTER 5 S OCEAN GRANDE DRIVE UNIT 201 PON Compensation of five highest-paid emplo | Dir, Sec 4 hrs/wk Dir, VP 3 hrs/wk Dir, VP 3 hrs/wk | ose included on li | ne 1—see | page 23 o | f the inst | ructio | ons). | |
| 21: BR 21: | RETTA W McMASTER 5 S OCEAN GRANDE DRIVE UNIT 201 PON RAIG L McMASTER 5 S OCEAN GRANDE DRIVE UNIT 201 PON RIAN W McMASTER 5 S OCEAN GRANDE DRIVE UNIT 201 PON | Dir, Sec 4 hrs/wk Dir, VP 3 hrs/wk Dir, VP 3 hrs/wk yees (other than th | | | page 23 o | | ructio | ons). | |
| 21: BR 21: 2 | RETTA W McMASTER 5 S OCEAN GRANDE DRIVE UNIT 201 PON RAIG L McMASTER 5 S OCEAN GRANDE DRIVE UNIT 201 PON RIAN W McMASTER 5 S OCEAN GRANDE DRIVE UNIT 201 PON Compensation of five highest-paid emplo If none, enter "NONE." | Dir, Sec 4 hrs/wk Dir, VP 3 hrs/wk Dir, VP 3 hrs/wk yees (other than th | age | (d) | Contributions t | o (e) | Expen | se acco | |
| 21: BR 21: 2 | RETTA W McMASTER 5 S OCEAN GRANDE DRIVE UNIT 201 PON RAIG L McMASTER 5 S OCEAN GRANDE DRIVE UNIT 201 PON RIAN W McMASTER 5 S OCEAN GRANDE DRIVE UNIT 201 PON Compensation of five highest-paid emplo | Dir, Sec 4 hrs/wk Dir, VP 3 hrs/wk Dir, VP 3 hrs/wk yees (other than th | age (c) Compensation | on (d) | Contributions t aployee benefit and deferred | o (e) | Expen | | |
| 21: BR 21: 2 | RETTA W McMASTER 5 S OCEAN GRANDE DRIVE UNIT 201 PON RAIG L McMASTER 5 S OCEAN GRANDE DRIVE UNIT 201 PON RIAN W McMASTER 5 S OCEAN GRANDE DRIVE UNIT 201 PON Compensation of five highest-paid emplo If none, enter "NONE." | Dir, Sec 4 hrs/wk Dir, VP 3 hrs/wk Dir, VP 3 hrs/wk yees (other than th | age (c) Compensation | on (d) | Contributions t | o (e) | Expen | se acco | |
| 21: BR 21: 2 | RETTA W McMASTER 5 S OCEAN GRANDE DRIVE UNIT 201 PON RAIG L McMASTER 5 S OCEAN GRANDE DRIVE UNIT 201 PON RIAN W McMASTER 5 S OCEAN GRANDE DRIVE UNIT 201 PON Compensation of five highest-paid emplo If none, enter "NONE." | Dir, Sec 4 hrs/wk Dir, VP 3 hrs/wk Dir, VP 3 hrs/wk yees (other than th | age (c) Compensation | on (d) | Contributions t aployee benefit and deferred | o (e) | Expen | se acco | |
| 21: BR 21: 2 | RETTA W McMASTER 5 S OCEAN GRANDE DRIVE UNIT 201 PON RAIG L McMASTER 5 S OCEAN GRANDE DRIVE UNIT 201 PON RIAN W McMASTER 5 S OCEAN GRANDE DRIVE UNIT 201 PON Compensation of five highest-paid emplo If none, enter "NONE." | Dir, Sec 4 hrs/wk Dir, VP 3 hrs/wk Dir, VP 3 hrs/wk yees (other than th | age (c) Compensation | on (d) | Contributions t aployee benefit and deferred | o (e) | Expen | se acco | |
| 21: BR 21: 2 | RETTA W McMASTER 5 S OCEAN GRANDE DRIVE UNIT 201 PON RAIG L McMASTER 5 S OCEAN GRANDE DRIVE UNIT 201 PON RIAN W McMASTER 5 S OCEAN GRANDE DRIVE UNIT 201 PON Compensation of five highest-paid emplo If none, enter "NONE." | Dir, Sec 4 hrs/wk Dir, VP 3 hrs/wk Dir, VP 3 hrs/wk yees (other than th | age (c) Compensation | on (d) | Contributions t aployee benefit and deferred | o (e) | Expen | se acco | |
| 21: BR 21: 2 | RETTA W McMASTER 5 S OCEAN GRANDE DRIVE UNIT 201 PON RAIG L McMASTER 5 S OCEAN GRANDE DRIVE UNIT 201 PON RIAN W McMASTER 5 S OCEAN GRANDE DRIVE UNIT 201 PON Compensation of five highest-paid emplo If none, enter "NONE." | Dir, Sec 4 hrs/wk Dir, VP 3 hrs/wk Dir, VP 3 hrs/wk yees (other than th | age (c) Compensation | on (d) | Contributions t aployee benefit and deferred | o (e) | Expen | se acco | |
| 21: BR 21: 2 | RETTA W McMASTER 5 S OCEAN GRANDE DRIVE UNIT 201 PON RAIG L McMASTER 5 S OCEAN GRANDE DRIVE UNIT 201 PON RIAN W McMASTER 5 S OCEAN GRANDE DRIVE UNIT 201 PON Compensation of five highest-paid emplo If none, enter "NONE." | Dir, Sec 4 hrs/wk Dir, VP 3 hrs/wk Dir, VP 3 hrs/wk yees (other than th | age (c) Compensation | on (d) | Contributions t aployee benefit and deferred | o (e) | Expen | se acco | |
| 21: BR 21: 2 | RETTA W McMASTER 5 S OCEAN GRANDE DRIVE UNIT 201 PON RAIG L McMASTER 5 S OCEAN GRANDE DRIVE UNIT 201 PON RIAN W McMASTER 5 S OCEAN GRANDE DRIVE UNIT 201 PON Compensation of five highest-paid emplo If none, enter "NONE." | Dir, Sec 4 hrs/wk Dir, VP 3 hrs/wk Dir, VP 3 hrs/wk yees (other than th | age (c) Compensation | on (d) | Contributions t aployee benefit and deferred | o (e) | Expen | se acco | |
| 21: BR 21: 2 | RETTA W McMASTER 5 S OCEAN GRANDE DRIVE UNIT 201 PON RAIG L McMASTER 5 S OCEAN GRANDE DRIVE UNIT 201 PON RIAN W McMASTER 5 S OCEAN GRANDE DRIVE UNIT 201 PON Compensation of five highest-paid emplo If none, enter "NONE." | Dir, Sec 4 hrs/wk Dir, VP 3 hrs/wk Dir, VP 3 hrs/wk yees (other than th | age (c) Compensation | on (d) | Contributions t aployee benefit and deferred | o (e) | Expen | se acco | |
| 21: BR 21: 2 | RETTA W McMASTER 5 S OCEAN GRANDE DRIVE UNIT 201 PON RAIG L McMASTER 5 S OCEAN GRANDE DRIVE UNIT 201 PON RIAN W McMASTER 5 S OCEAN GRANDE DRIVE UNIT 201 PON Compensation of five highest-paid emplo If none, enter "NONE." | Dir, Sec 4 hrs/wk Dir, VP 3 hrs/wk Dir, VP 3 hrs/wk yees (other than th | age (c) Compensation | on (d) | Contributions t aployee benefit and deferred | o (e) | Expen | se acco | |

Total number of other employees paid over \$50,000

| Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employe and Contractors (continued) 3 Five highest-paid independent contractors for professional services (see page 23 of the instructions). If none, enter "NONE." (a) Name and address of each person paid more than \$50,000 (b) Type of service (c) Comp. NONE Total number of others receiving over \$50,000 for professional services Part IX-A Summary of Direct Charitable Activities List the foundation's four largest direct charitable activities during the tax year include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc 1 NONE 1 NONE 4 | |
|--|-----|
| (a) Name and address of each person paid more than \$50,000 (b) Type of service (c) Comp. NONE Total number of others receiving over \$50,000 for professional services Part IX-A Summary of Direct Charitable Activities List the foundation's four largest direct charitable activities during the tax year Include relevant statistical information such as the number of organizations and other beneficianes served, conferences convened, research papers produced, etc 1 NONE 2 3 | |
| (a) Name and address of each person paid more than \$50,000 (b) Type of service (c) Comp. NONE Total number of others receiving over \$50,000 for professional services Part IX-A Summary of Direct Charitable Activities List the foundation's four largest direct charitable activities during the tax year Include relevant statistical information such as the number of organizations and other beneficianes served, conferences convened, research papers produced, etc 1 NONE 2 3 | |
| Total number of others receiving over \$50,000 for professional services Part IX-A Summary of Direct Charitable Activities List the foundation's four largest direct charitable activities during the tax year include relevant statistical information such as the number of organizations and other beneficianes served, conferences convened, research papers produced, etc 1 NONE 2 3 | 1 |
| Total number of others receiving over \$50,000 for professional services Part IX-A Summary of Direct Charitable Activities List the foundation's four largest direct charitable activities during the tax year Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc 1 NONE 2 | 1 |
| Total number of others receiving over \$50,000 for professional services Part IX-A Summary of Direct Charitable Activities List the foundation's four largest direct charitable activities during the tax year Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc 1 NONE 2 3 | 1 |
| Total number of others receiving over \$50,000 for professional services Part IX-A Summary of Direct Charitable Activities List the foundation's four largest direct charitable activities during the tax year Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc 1 NONE 2 | 1 |
| Total number of others receiving over \$50,000 for professional services Part IX-A Summary of Direct Charitable Activities List the foundation's four largest direct charitable activities during the tax year Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc 1 NONE 2 3 | 1 |
| Part IX-A Summary of Direct Charitable Activities List the foundation's four largest direct charitable activities during the tax year Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc 1 NONE 2 | 1 |
| List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc. 1 NONE 2 | |
| the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc 1 NONE 2 | |
| 2 | ses |
| 3 | |
| | |
| 4 | |
| | |
| Part IX-B Summary of Program-Related Investments (see page 24 of the instructions) | |
| Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2 Amo | unt |
| 1 NONE | |
| 2 | |
| All other program-related investments. See page 24 of the instructions 3 | |

Total. Add lines 1 through 3

Form **990-PF** (2009)

| r all | withing investment Return (All domestic roundations must complete this part. Foreign in | Ourida | mons, |
|-------|---|---------|----------|
| | see page 24 of the instructions) | | <u> </u> |
| 1 | Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., | | |
| | purposes | Ì | |
| а | Average monthly fair market value of securities | 1a | 725,099 |
| b | Average of monthly cash balances | 1b | |
| С | Fair market value of all other assets (see page 24 of the instructions) | 1c | |
| d | Total (add lines 1a, b, and c) | 1d | 725,099 |
| е | Reduction claimed for blockage or other factors reported on lines 1a and | | |
| | 1c (attach detailed explanation) | ì | |
| 2 | Acquisition indebtedness applicable to line 1 assets | 2 | |
| 3 | Subtract line 2 from line 1d | 3 | 725,099 |
| 4 | Cash deemed held for charitable activities Enter 1½ % of line 3 (for greater amount, see page 25 | | |
| | of the instructions) . | 4 | 10,876 |
| 5 | Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4 | 5 | 714,223 |
| 6 | Minimum investment return. Enter 5% of line 5 | 6 | 35,711 |
| Par | Distributable Amount (see page 25 of the instructions) (Section 4942(j)(3) and (j)(5) private of | peratin | g |
| | foundations and certain foreign organizations check here 🕒 🔲 and do not complete this part) | | |
| 1 | Minimum investment return from Part X, line 6 | _1 | 35,711 |
| 2a | Tax on investment income for 2009 from Part VI, line 5 | | |
| b | Income tax for 2009 (This does not include the tax from Part VI) | | |
| С | Add lines 2a and 2b | 2c | 607 |
| 3 | Distributable amount before adjustments Subtract line 2c from line 1 | 3 | 35,104 |
| 4 | Recoveries of amounts treated as qualifying distributions | 4 | |
| 5 | Add lines 3 and 4 | 5 | 35,104 |
| 6 | Deduction from distributable amount (see page 25 of the instructions) | 6 | |
| 7 | Distributable amount as adjusted Subtract line 6 from line 5. Enter here and on Part XIII, | | |
| | line 1 | 7 | 35,104 |
| Part | XII Qualifying Distributions (see page 25 of the instructions) | | |
| 1 | Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes | | |
| а | Expenses, contributions, gifts, etc —total from Part I, column (d), line 26 | 1a | 35,100 |
| b | Program-related investments—total from Part IX-B | 1b | |
| 2 | Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., | | |
| | purposes | 2 | |
| 3 | Amounts set aside for specific charitable projects that satisfy the | | |
| а | Suitability test (prior IRS approval required) | 3a | |
| b | Cash distribution test (attach the required schedule) | 3b | |
| 4 | Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4 | 4 | 35,100 |
| 5 | Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment | | |
| | income Enter 1% of Part I, line 27b (see page 26 of the instructions) | 5 | |
| 6 | Adjusted qualifying distributions. Subtract line 5 from line 4 | 6 | 35,100 |
| | Note. The amount on line 6 will be used in Part V. column (b), in subsequent years when calculating whether the found | ation | |

qualifies for the section 4940(e) reduction of tax in those years

| ralit | VIII Undistributed Income (see page 26 of the | (a) | (b) | (c) | (d) |
|-------|---|--|---------------------|------|--------------|
| 1 | Distributable amount for 2009 from Part XI, | Corpus | Years prior to 2008 | 2008 | 2009 |
| | line 7 | | | | 35,104 |
| 2 | Undistributed income, if any, as of the end of 2009 | | | | |
| а | Enter amount for 2008 only | | | · | |
| b | Total for prior years 20, 20, 20 | | ··· | | |
| 3 | Excess distributions carryover, if any, to 2009 | l | | | |
| а | From 2004 | | | | |
| þ | From 2005 | İ | | | |
| С | From 2006 | | | | |
| d | From 2007 30,982 | | | | |
| е | From 2008 | | | | |
| f | Total of lines 3a through e | 30,982 | | | |
| 4 | Qualifying distributions for 2009 from Part | | | | |
| _ | XII, line 4 \$ 35,100 | | | - | |
| | Applied to 2008, but not more than line 2a | | | | |
| D | Applied to undistributed income of prior years | | | | |
| _ | (Election required—see page 26 of the instructions) Treated as distributions out of corpus (Election | | | | |
| · | required—see page 26 of the instructions) | | | | |
| Ч | Applied to 2009 distributable amount | | | | 35,100 |
| | Remaining amount distributed out of corpus | , | | | |
| 5 | Excess distributions carryover applied to 2009 | 4 | | | 4 |
| · | (If an amount appears in column (d), the | - | | | |
| | same amount must be shown in column (a)) | | | | |
| 6 | Enter the net total of each column as | | | | |
| | indicated below: | gar yan and and an annual and an | * | | |
| а | Corpus Add lines 3f, 4c, and 4e Subtract line 5 | 30,978 | | * | |
| þ | Prior years' undistributed income Subtract | | | | |
| | line 4b from line 2b | | | | |
| С | Enter the amount of prior years' undistributed | | | | |
| | income for which a notice of deficiency has | | | | |
| | been issued, or on which the section 4942(a) | | | | |
| | tax has been previously assessed | | | | |
| d | Subtract line 6c from line 6b Taxable | | | | |
| | amount—see page 27 of the instructions | <u> </u> | | | |
| е | | | | | |
| | 4a from line 2a Taxable amount—see page 27 of the | | | | |
| f | Instructions Undistributed income for 2009 Subtract | | | | |
| ı | lines 4d and 5 from line 1. This amount must | | | | |
| | be distributed in 2010 | | | | |
| 7 | Amounts treated as distributions out of | | | | |
| • | corpus to satisfy requirements imposed by | | | | 1 |
| | section 170(b)(1)(F) or 4942(g)(3) (see page 27 of | | | | |
| | the instructions) | | | | |
| 8 | Excess distributions carryover from 2004 | | | | |
| | not applied on line 5 or line 7 (see page 27 of the | | | | |
| | instructions) | | | | |
| 9 | Excess distributions carryover to 2010. | | | | |
| | Subtract lines 7 and 8 from line 6a | 30,978 | | | |
| 10 | Analysis of line 9 | | | | |
| а | Excess from 2005 | | | | 1 |
| b | Excess from 2006 | | | | |
| С | Excess from 2007 30,978 | | | | |
| d | Excess from 2008 | | | | |
| ۵ | Excess from 2009 | | | 1 | 1 |

| For | m 990-PF (2009) THE MCMASTER FAMILY F | OUNDATION, IN | IC | | 03-0577 | 385 Page 10 |
|-----|--|---|------------------------|------------------------|----------------|--------------------|
| Pa | art XIV Private Operating Foundations (s | ee page 27 of the | he instructions a | nd Part VII-A, qu | iestion 9) | N/A |
| 1 : | a If the foundation has received a ruling or determination foundation, and the ruling is effective for 2009, ent | | . , . | • | · · | |
| ı | b Check box to indicate whether the foundation is a | private operating fo | undation described i | n section | 4942(J)(3) or | 4942(J)(5) |
| 2 8 | a Enter the lesser of the adjusted net | Tax year | [<u>.</u> | Prior 3 years | | |
| | income from Part I or the minimum investment return from Part X for each | (a) 2009 | (b) 2008 | (c) 2007 | (d) 2006 | (e) Total |
| | year listed | | | | | |
| 1 | b 85% of line 2a | | | i | | |
| (| C Qualifying distributions from Part XII, line 4 for each year listed | | | | | |
| (| d Amounts included in line 2c not used directly for active conduct of exempt activities | | | | - | |
| (| e Qualifying distributions made directly for active conduct of exempt activities Subtract line 2d from line 2c | | | | | |
| 3 | Complete 3a, b, or c for the alternative test relied upon a "Assets" alternative test—enter | | | | | |
| | (1) Value of all assets | | İ | | | |
| | (2) Value of assets qualifying under section 4942(j)(3)(B)(i) | | | | | |
| ı | b "Endowment" alternative test—enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed | | | | | |
| | "Support" alternative test—enter | · · · · · · · · · · · · · · · · · · · | | | | |
| | (1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalities) | | | | | |
| | (2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii) | | | | | |
| | (3) Largest amount of support from an exempt organization | | | | | |
| | (4) Gross investment income | | | | | |
| D: | art XV Supplementary Information (Cor | nnlete this nar | t only if the fou | ndation had \$5 | 000 or more in | |
| | assets at any time during the year | | | | | |
| 1 | Information Regarding Foundation Manag | | | | | |
| - | List any managers of the foundation who have con before the close of any tax year (but only if they ha | tributed more than : | | | the foundation | |
| NC | DNE | | | | | |
| | List any managers of the foundation who own 10% ownership of a partnership or other entity) of which | | | | ortion of the | |
| 2 | NE Information Regarding Contribution, Gran | t. Gift. Loan, Sch | nolarship etc. Pr | rograms: | | |
| _ | Check here If the foundation only makes unsolicited requests for funds. If the foundation ma under other conditions, complete items 2a, b, c, an | contributions to pre kes gifts, grants, et | selected charitable | organizations and do | | ons |
| a | The name, address, and telephone number of the | person to whom app | olications should be | addressed | | |
| LE | E W McMASTER 215 SOUTH OCEAN GRAN | DE DRIVE, UNIT | 201 PONTE VED | RA FL 32082 (904 | 1) 825-2110 | ···· |
| | The form in which applications should be submitted | and information a | nd materials they sh | ould include | | |
| | ORGANIZATION LETTERHEAD | | - | | | |
| (| Any submission deadlines | | | | | |
| _ | DNE | | | | | |
| C | Any restrictions or limitations on awards, such as b factors | y geographical area | as, charitable fields, | kinds of institutions, | or other | |
| NC | DNE | | | | | |

Part XV Supplementary Information (continued)

| 3 Grants and Contributions Paid During the | ear or Approved fo | r Future Pa | yment | |
|--|--|----------------------|-------------------------------------|--------------|
| Recipient | If recipient is an individual, show any relationship to any foundation manager | Foundation status of | Purpose of grant or contribution | Amount |
| Name and address (home or business) | or substantial contributor | recipient | contribution | |
| a Paid during the year | | | | |
| First Congregational Church | | | Charitable giving to | |
| 103 Main Street Ridgefield CT 06877 | | 5Ū1(c)(3) | public charity | 20,200 |
| ALS Association | | | Charitable giving to | |
| 27001 Agoura Rd, suite 250 Calabasas Hills CA 9130 | | 501(c)(3) | public charity | 500 |
| HDHM for KJFF | | | Charitable giving to | |
| PO Box 5330 Brookfield CT 06804 | | 501(c)(3) | public charity | 1,500 |
| St Jude's Hospital 501 St Jude Place Memphis TN 38105 | | 501/0//2) | Charitable giving to public charity | 200 |
| TW Frazer Russell Fund Univ of Delaware | | 501(c)(3) | Charitable giving to | 200 |
| 102 Dupont Hall Newark DE 19716 | | 501(c)(3) | public charity | 2,000 |
| St Nicholas Byzantine Catholic Church | | 001(0)(0) | Charitable giving to | 2,000 |
| 13 Pembroke Road Danbury CT 06811 | | 501(c)(3) | public charity | 500 |
| St Joseph's Catholic School | | | Charitable giving to | |
| 11600 Old St Augustine Road Jacksonville FL 32258 | | 501(c)(3) | public charity | 500 |
| Univ of Delaware ChE | | | Charitable giving to | |
| Rees Hall Newark DE 19716 | | 501(c)(3) | public charity | 2,000 |
| Univ of Delaware Athletic Fund Track | | | Charitable giving to | |
| PO Box 6003 Newark DE 19716 | | 501(c)(3) | public charity | 1,000 |
| MIT Alumni Fund ChE | | | Charitable giving to | |
| 77 Massachusetts Avenue Cambridge MA 02139 | | 501(c)(3) | public charity | 2,000 |
| St Gerard's Campus | | 504()(0) | Charitable giving to | 400 |
| PO Box 4382 St Augustine FL 32085 | | 501(c)(3) | public charity | 100 |
| Meals on Wheels of Ridgefield, Inc | | 501(0)(2) | Charitable giving to public charity | 100 |
| 25 Gilbert Street #A6 Ridgefield CT 06877 Regional Hospice of Western CT | | 501(c)(3) | Charitable giving to | 100 |
| 405 Main Street Danbury CT 06810 | | 501(c)(3) | public charity | 200 |
| Keeler Tavern Preservation Society | | 001(0)(0) | Charitable giving to | 200 |
| 132 Main Street Ridgefield CT 06877 | | 501(c)(3) | public charity | 100 |
| Ridgefield Volunteer Fire Dept | | | Charitable giving to | |
| 6 Catoonah Street Ridgefield CT 06877 | | 501(c)(3) | public charity | 200 |
| Founder's Hall | | | Charitable giving to | |
| 193 Danbury Road Ridgefield CT 06877 | | 501(c)(3) | public charity | 100 |
| Total See Attached Statement . | • | | . ▶ 3a | 35,100 |
| b Approved for future payment | | · | | |
| | | | | |
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| | | <u> </u> | | |
| Total | <u> </u> | <u> </u> | . ▶ 3b | 990 PE (999) |

Part XVI-A Analysis of Income-Producing Activities

| | Unrelated bus | siness income | Excluded by section | on 512 513 or 514 | (0) |
|---|--------------------------------------|-------------------|-----------------------|-------------------|---|
| Enter gross amounts unless otherwise indicated | (a) Business code | (b) Amount | (c) Exclusion code | (d) Amount | (e) Related or exempt function income (See page 28 of |
| 1 Program service revenue | | | | | the instructions) |
| a | - | | | | |
| b | | | <u></u> | | - · · <u>- · · · · · · · · · · · · · · · ·</u> |
| C | · - | | <u> </u> | _ | |
| d | | | | | |
| e | | | | | |
| f | | | | | |
| g Fees and contracts from government agencies | | | | | |
| 2 Membership dues and assessments | | | | | |
| 3 Interest on savings and temporary cash investments | | | 14 | 6 | |
| 4 Dividends and interest from securities | | | 14 | 31,671 | |
| 5 Net rental income or (loss) from real estate | - VI. | | | | |
| a Debt-financed property | | | | | |
| b Not debt-financed property | | | | | |
| 6 Net rental income or (loss) from personal property | - | | | | _ |
| 7 Other investment income | | | | | |
| 8 Gain or (loss) from sales of assets other than inventory | | | | | |
| 9 Net income or (loss) from special events | | | | | |
| , , , | | | | | |
| 10 Gross profit or (loss) from sales of inventory | ļ | | - | | |
| 11 Other revenue a | | | | | |
| b | ļ | | <u> </u> | | |
| c | | | | | |
| d | | | | | |
| e | | | | | |
| 12 Subtotal Add columns (b), (d), and (e) | | | | _31,677 | <u> </u> |
| | | | | | |
| 13 Total. Add line 12, columns (b), (d), and (e) | | | | 13 | 31,677 |
| See worksheet in line 13 instructions on page 28 to verify calc | | | | 13 | 31,677 |
| (See worksheet in line 13 instructions on page 28 to verify calc Part XVI-B Relationship of Activities to the Ac | complishment | | | | 31,677 |
| See worksheet in line 13 instructions on page 28 to verify calc | complishment | umn (e) of Part X | VI-A contributed in | mportantly to | 31,677 |
| Relationship of Activities to the Active No. Explain below how each activity for which incomplete the accomplishment of the foundation's exempt | complishment | umn (e) of Part X | VI-A contributed in | mportantly to | 31,677 |
| Relationship of Activities to the Active No. Explain below how each activity for which incomplete the accomplishment of the foundation's exempt | complishment | umn (e) of Part X | VI-A contributed in | mportantly to | 31,677 |
| Relationship of Activities to the Active No. Explain below how each activity for which incomplete the accomplishment of the foundation's exempt | complishment | umn (e) of Part X | VI-A contributed in | mportantly to | 31,677 |
| Relationship of Activities to the Active No. Explain below how each activity for which incomplete the accomplishment of the foundation's exempt | complishment | umn (e) of Part X | VI-A contributed in | mportantly to | 31,677 |
| Relationship of Activities to the Active No. Explain below how each activity for which incomplete the accomplishment of the foundation's exempt | complishment | umn (e) of Part X | VI-A contributed in | mportantly to | 31,677 |
| Relationship of Activities to the Active No. Explain below how each activity for which incomplete the accomplishment of the foundation's exempt | complishment | umn (e) of Part X | VI-A contributed in | mportantly to | 31,677 |
| Relationship of Activities to the Active No. Explain below how each activity for which incomplete the accomplishment of the foundation's exempt | complishment | umn (e) of Part X | VI-A contributed in | mportantly to | 31,677 |
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| Relationship of Activities to the Active No. Explain below how each activity for which incomplete the accomplishment of the foundation's exempt | complishment e is reported in col | umn (e) of Part X | VI-A contributed in | mportantly to | 31,677 |

self-employed), address, and ZIP code

| Forn | n 990-PF | (2009) THE MCMA | STER FAMIL | Y FOUNDATION, I | INC | | | 03-0577 | '385 | Page | e 13 |
|-----------|--------------------------------|---|---------------------|---------------------------|----------------------|--|--------------------------|-----------------------|---------------------------------------|--------|----------|
| Pa | rt XVII | Information Reg | arding Trans | | | nd Rel | ationships Wi | th Nonchari | able | | |
| | | Exempt Organiz | | | | | | | · | | |
| 1 | | e organization directly | | | | | | | | Yes | No |
| | | tion 501(c) of the Code | e (other than s | ection 501(c)(3) o | rganizations) c | or in sect | tion 527, relating | i to political | | | |
| | organi | zations? | | | | | | | 1 | | |
| а | Transf | fers from the reporting | foundation to | a noncharitable ex | xempt organiza | ation of | | | | | |
| | (1) Ca | ash . | | | | | | | 1a(1) | | Х |
| | (2) 01 | ther assets | | | | | | | 1a(2) | | X |
| b | Other | transactions: | | | | | | | | | |
| | | ales of assets to a non | | | | | | | 1b(1) | | X |
| | | urchases of assets fro | | | | | • | • | 1b(2) | | <u>X</u> |
| | | ental of facilities, equip | | r assets | • • | • | • | | 1b(3) | | X |
| | | eimbursement arrange | | | | • | • | | 1b(4) | | X |
| | | oans or loan guarantee | | | | | | | 1b(5) | | X |
| | | erformance of services | | | | | • • | • | 1b(6) | | X |
| | | ng of facilities, equipme | | | | | | | 1c | | _X |
| d | value | answer to any of the a of the goods, other as in any transaction or s | sets, or service | es given by the rei | porting foundat | tion If th | ne foundation red | ceived less tha | n fair m | narket | Ł |
| (a) | Line no | (b) Amount involved | (c) Name o | of noncharitable exempt | organization | (d) Des | cription of transfers, t | ransactions, and s | haring arr | angem | ents |
| ` ' | | \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ | <u> </u> | | | | <u></u> | | | | |
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| | | | | | | | | | | | |
| 2a | | foundation directly or | | | | | | tions | V [V | l NI. | |
| L | | bed in section 501(c) | | ther than section : | 501(c)(3)) or in | section | 5217 | · Ц | Yes X |] NO | |
| <u> </u> | ii res | s," complete the follow | ing scriedule | (h) Tuno | of organization | | (c) Des | cription of relations | hin. | | |
| | | (a) Name of organization | | (b) Type | or organization | | (0) 003 | Cription of relations | · · · · · · · · · · · · · · · · · · · | | |
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| | | | | | | | | | | | |
| | Und | er penalties of perjury, I decl | are that I have exa | mined this return, includ | ling accompanying | schedules | and statements, and | to the best of my | knowledg | e and | |
| | belie | ef, it is true, correct, and com | plete Declaration | of preparer (other than t | axpayer or fiducian | y) is based | on all information of | which preparer has | any kno | wledge | |
| | 1. | 12/m ~ | · | | 1 5 | i-13~ | 1000 | 169 | | | |
| စ | | 17 11/2/11 | 1000 | | | ate | Tul | <u>Kresident</u> | | | |
| ē | F Sig | gnature of officer or trustee | | | | | | - | | | |
| Sign Here | | | 7 AC | Craw | Date | | Check if | Preparer's number (se | | | |
| <u>_</u> | _ s ≥ | Preparer's | LINZ | MENT | | | self-employed | page 30 of | _ | | |
| S | par Par O | signature | | - | 5/11/20 ⁻ | 10 | | POO1862 | | | |
| | Paid Preparer's Use Only | Firm's name (or yours if | ROBERT | J. CREAMER, P.O. | | | | EIN ► 06-14 | | | |
| | 1 | colf amplayed) address | | | | | | | | | |

Phone no (203) 438-3033

412 MAIN STREET, RIDGEFIELD, CT 06877

Schedule B

(Form` 990, 990-EZ, or 990-PF)

Department of the Treasury Internal Revenue Service

Schedule of Contributors

Attach to Form 990, 990-EZ, or 990-PF.

OMB No 1545-0047

2009

Name of the organization Employer identification number THE MCMASTER FAMILY FOUNDATION, INC 03-0577385 Organization type (check one) Filers of: Section: Form 990 or 990-EZ 501(c)() (enter number) organization 4947(a)(1) nonexempt charitable trust not treated as a private foundation 527 political organization Form 990-PF X 501(c)(3) exempt private foundation 4947(a)(1) nonexempt charitable trust treated as a private foundation 501(c)(3) taxable private foundation Check if your organization is covered by the General Rule or a Special Rule. Note. Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule See instructions General Rule For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. **Special Rules** For a section 501(c)(3) organization filing Form 990 or 990-EZ that met the 33 1/3 % support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), and received from any one contributor, during the year, a contribution of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h or (ii) Form 990-EZ, line 1 Complete Parts I and For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, aggregate contributions of more than \$1,000 for use exclusively for religious, charitable, scientific, literary, or educational purposes, or the prevention of cruelty to children or animals Complete Parts I, II, and III For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions for use exclusively for religious, charitable, etc., purposes, but these contributions did not aggregate to more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Do not complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions of \$5,000 or more during the year Caution. An organization that is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, 990-EZ, or 990-PF), but it must answer "No" on Part IV, line 2 of its Form 990, or check the box on line H of its Form 990-EZ, or on line 2 of its Form 990-PF, to certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF)

Continuation of Part XV, Line 3a (990-PF) - Grants and Contributions Paid During the Year Recipient(s) paid during the year Name Special Olympics FL Person Business Street 1105 Citrus Tower Blvd City State Foreign Country Zip code 34711 Clermont Relationship Foundation Status 501(c)(3) Purpose of grant/contribution Amount Charitable giving to public charity 100 Name Sean Robert Marsh Ped Heart Foundation Person Business Street PO Box 4820 City State Zip code Foreign Country CT 06907 Stamford Foundation Status Relationship 501(c)(3) Purpose of grant/contribution Amount Charitable giving to public charity 1,000 Name National Psoriasis Foundation Person Business Street 6600 SW 92nd Avenue State Zıp code Foreign Country City OR 97223 Portland Relationship Foundation Status 501(c)(3) Purpose of grant/contribution Amount Charitable giving to public charity 1,000 Name Business Evelyn C Peeler Children's Foundation Person Street PO Box 218, 54 Danbury Rd City Foreign Country State Zip code CT 06877 Ridgefield Relationship Foundation Status 501(c)(3) Purpose of grant/contribution Amount 200 Charitable giving to public charity Name Person Business Mayo Clinic Good Samaritan Fund Street 200 First Street SW Zip code Foreign Country City State 55905 Rochester Foundation Status Relationship 501(c)(3) Purpose of grant/contribution Amount 250 Charitable giving to public charity Name St Francis House Person Business Street 39 Boylston Street State Zip code Foreign Country City 02116 MA **Boston** Foundation Status Relationship 501(c)(3) Purpose of grant/contribution Amount

Charitable giving to public charity

150

Continuation of Part XV, Line 3a (990-PF) - Grants and Contributions Paid During the Year Recipient(s) paid during the year Name Housatonic Habitat for Humanity Person Business Street 90 Shelter Rock Road City State Zip code Foreign Country Danbury 06811 CT Relationship Foundation Status 501(c)(3) Purpose of grant/contribution Amount Charitable giving to public charity 500 Name Church World Service Person Business Street PO Box 968 City State Zıp code Foreign Country Elkhart IN 46515 Relationship Foundation Status 501(c)(3) Purpose of grant/contribution Amount Charitable giving to public charity 200 Name Salvation Army Person Business Street 129 Main Street City State Zip code Foreign Country CT 06810 Danbury Relationship Foundation Status 501(c)(3) Purpose of grant/contribution Amount Charitable giving to public charity 500 Name Person Business Street City State Zip code Foreign Country Relationship Foundation Status Purpose of grant/contribution Amount Name Person Business Street Zıp code City State Foreign Country Relationship Foundation Status Purpose of grant/contribution Amount Name Person Business Street City State Zip code Foreign Country Relationship Foundation Status Purpose of grant/contribution Amount

Line 11 (990-PF) - Other Income

| | | 1 FIDELIT | 2 | 3 | 4 | 5 | 9 | 7 | 8 | 6 | 10 |
|-----|--------------------------------------|------------------------------|---|---|----|---|---|---|---|---|----|
| | Description | Y - CAPITAL GAIN DISTRIBUTIO | | | | | | | | | |
| | Revenue and Expenses per Books | | | | | | | | | | |
| 475 | Net Investment Income | 475 | | | | | | | | | |
| | Adjusted Net Income | | | | | | | | | | |
| | | $\overline{}$ | | ī | T- | ī | i | ī | ł | 7 | ī |

THE MCMASTER FAMILY FOUNDATION, INC

Line 16b (990-PF) - Accounting Fees

| | | 200 | 700 | | |
|----|---|-----------------------|-----------------------|------------------------|-------------------------------|
| | | Revenue and | | | Disbursements for Charitable |
| | Name of Organization or Person Providing Service | Expenses per Books | Net Investment Income | Adjusted Net Income | Purposes (Cash Basis Only) |
| - | Robert J. Creamer - Tax Prep Fee | 002 | 200 | | |
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Line 18 (990-PF) - Taxes

| | | 1,113 | 1,113 | | |
|----|---|-------------------------|----------------|------------|-----------------------------|
| | | Revenue and Expenses | Net Investment | Adjusted | Disbursements for Chantable |
| | Description | per Books | Income | Net Income | Purposes |
| - | Real estate tax not included in line 20 | | | | |
| 2 | Tax on investment income | 846 | 846 | | |
| 3 | Income tax | | | | |
| 4 | Foreign Tax on Dividends | 267 | 267 | | |
| 5 | | | | | |
| 9 | | | | | |
| 7 | | | | | |
| 8 | | | | | |
| 6 | | | | | |
| 10 | | | | | |

| Stock | |
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| vestments | |
| Inves | |
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| 10b (990-PF) | |
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| Line (| |
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| = | |
| Part II, | |

| | | | 951,880 | 915,689 | 664,566 | 792,096 |
|-----|----------------------------------|-------------|------------|------------|-----------------|--------------------|
| | notunion | Num Shares/ | Book Value | Book Value | FMV Red of Year | FMV End of Year |
| | BP PLC ADR | 100 | | 6,659 | | 5.797 |
| 7 | BANK OF AMERICA CORP | 112 | 2,519 | 2,519 | 1,577 | 1,687 |
| 3 | CITIGROUP INC | 97 | 4,491 | 4,491 | 651 | 321 |
| 4 | DIAGEO PLC | 117 | 5,104 | 5,104 | 6:99 | 3,121 |
| 5 | HANCOCK JOHN PFDEQUITY INCOME FD | 1,300 | 24,428 | 24,428 | 18,018 | 22,230 |
| 9 | ISHARES TR RUSSELL MIDCAP VALUE | 300 | 13,712 | 13,712 | 8,532 | 11,085 |
| 7 | ISHARES TR RUSSELL MIDCAP GROWTH | 240 | 12,852 | 12,852 | 7,507 | 10,882 |
| 8 | ISHARES TR RUSSELL 2000 VALUE | 185 | 12,734 | 12,734 | 960'6 | 10,737 |
| 6 | JPMORGAN CHASE & CO | 184 | 5,375 | 5,375 | 5,801 | 7,668 |
| 110 | JOHNSON & JOHNSON | 06 | 3,571 | 3,571 | 5,384 | 5,796 |
| 7 | NOVARIS AG ADR | 47 | 1,768 | 1,768 | 2,339 | 2,558 |
| 12 | VANGUARD EMERGING MKTS VIPERS | 150 | 7,164 | 7,164 | 3,536 | 6,151 |
| 13 | VANGUARD INT'L EQUITY - PACIFIC | 395 | 25,953 | 25,953 | 17,309 | 20,271 |
| 14 | VANGUARD INT'L EQUITY - EUROPEAN | 1,105 | 77,489 | 77,489 | 42,388 | 53,571 |
| 15 | VANGUARD INDEX MIDCAP | 105 | 7,632 | 7,632 | 4,537 | 6,294 |
| 16 | VANGUARD INDEX LARGE CAP | 495 | 30,999 | 30,999 | 20,171 | 25,082 |
| 11 | VANGUARD INDEX GROWTH | 350 | 21,070 | 21,070 | 13,829 | 18,572 |
| 18 | VANGUARD INDEX VALUE | 009 | 38,760 | 38,760 | 24,696 | 28,651 |
| 19 | WELLS FARGO & CO | 150 | 3,563 | 3,563 | 4,422 | 4,048 |
| 20 | AMERICAN BEACON LARGE CAP | 1,881 | 39,935 | 40,401 | 24,293 | 30,892 |
| 21 | BARON GROWTH | 148 | 7,247 | 7,253 | 4,568 | 6,131 |
| 22 | FBR FOCUS FUND | 288 | 14,201 | 14,201 | 8,858 | 11,940 |
| 23 | FAIRHOLME FUND | 1,816 | 55,659 | 56,140 | 39,318 | 24,657 |
| 24 | POLARIS GLOBAL VALUE | 1,972 | 32,705 | 33,297 | 16,485 | 23,131 |
| 22 | KINETICS SMALL CAP OPPORTUNITIES | 541 | 15,646 | 15,646 | 7,128 | 11,193 |
| 26 | PERRITT MICROCAP OPPORTUNITIES | 503 | 13,502 | 13,502 | 7,129 | 10,899 |
| 27 | QUANTITATIVE SMALL CAP ORDINARY | 324 | 6,850 | 088'9 | 3,624 | 4,832 |
| 28 | ROYCE VALUE FUND | 1,235 | 13,187 | 13,187 | 8,647 | 12,513 |
| 29 | THE DELAFIELD FUND | 610 | 14,754 | 14,789 | 9,181 | 14,217 |
| 30 | WELLS FARGO CAPITAL GROWTH FD | 1,543 | 26,989 | 26,989 | 15,457 | 20,794 |
| 31 | LOOMIS SAYLES BOND RETAIL SHARES | 8,260 | 112,031 | 117,962 | 80,233 | 109,779 |
| 32 | T ROWE PRICE HIGH YLD BD | 1,201 | 50,092 | 8,422 | 32,955 | 7,710 |
| 33 | TCW TOTAL RETURN BD FD | 11,174 | 109,832 | 106,200 | 105,334 | 110,739 |
| 34 | VANGUARD INFLATION PROTECTED SEC | 1,550 | 18,168 | 18,494 | 17,559 | 19,455 |
| 32 | VANGUARD INTERMED TRM INVST | 2,804 | 26,342 | 27,764 | 22,893 | 26,972 |
| 36 | FMI PROVIDENT TRUST STRATEGY FD | 3,422 | 25,940 | 25,979 | 20,845 | 26,011 |
| 37 | FIDELITY CASH RESERVES | 623 | | | 2,755 | 623 |
| 38 | DCT INDL TR INC | 4,500 | 49,878 | 49,661 | 22,770 | 22,590 |
| 39 | VENTAS INC | 400 | 13,079 | 13,079 | 13,428 | 17,496 |
| 40 | | | | | | |
| 41 | | | | | | |
| 42 | | | | | | |
| 43 | | | | | | |
| 4 | | | | | | |
| 45 | | | | | | |

Part II, Line 10b (990-PF) - Investments - Corporate Stock

| | | 951,880 | 915,689 | 664,566 | 792,096 |
|-------------|-------------|---|-------------|-------------|-------------|
| | Num Shares/ | Book Value | Book Value | FMV | |
| Description | Face Value | Face Value Beg of Year End of Year Beg of Year Find of Year | End of Year | Bed of Year | Fnd of Year |

Part IV (990-PF) - Capital Gains and Losses for Tax on Investment Income

| | | | Amount | | | | | | | | | | | |
|---|---|---------------|---------|----------|-----------|-----------|--------|--------------|-----------------|---------|----------|----------------|----------------|--------------------------------------|
| | Long Term CG Distributions |)Istributions | ! | | | | | | | | | | | _ |
| | Short Term CG Distributions | Instributions | | | | Totals | 52,000 | | 57,236 | -5,236 | | | | -5.236 |
| | | | | | | | Gross | | Cost or Other | | FM ∨ | Adjusted Basis | | Gains Minus Excess |
| | | | | How | Date | Date | Sales | Depreciation | Basis Plus | Gain or | as of | as of | Excess of FMV | Excess of FMV of FMV Over Adjusted |
| | Kind(s) of Property Sold |)ld | CUSIP # | Acquired | Acquired | Sold | Price | Allowed | Expense of Sale | Loss | 12/31/69 | 12/31/69 | Over Adj Basis | Basis or Losses |
| - | T Rowe Price High Yld Bd - 6420 546 shs | 20 546 shs | | d. | various | 11/9/2009 | 40,000 | | 44,891 | -4,891 | | | | 4 891 |
| 7 | TCW Total Return Bd Fd - 1308 615 | 8 615 | | <u>a</u> | 5/22/2007 | 4/13/2009 | 12,000 | | 12,345 | | | | | -345 |
| 3 | | | | | | | | | | | | | | |
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Part VIII, Line 1 (990-PF) - Compensation of Officers, Directors, Trustees and Foundation Managers

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|--------------------------|--|------------------------------|------------------------------|--|---|---|---|---|---|----|
| Average | 5 hrs/w | 4 hrs/w | 3 hrs/wk | 3 hrs/wk | | | | | | |
| Title | Dir, Pres, Trea5 hrs/wk | Dir. Sec 4 hrs/wk | DIT VP | | | | | | | |
| Foreign | | | | | | | | | | |
| State Zip Code | 32082 | 32082 | 32082 | 32082 | | | | | | |
| State | FL | 깊 | 1 | l L | | | | | | |
| Cıty | PONTE VEDRA | PONTE VEDRA | PONTE VEDRA | PONTE VEDRA | | | | | | |
| Street | 215 S OCEAN GRANDE DRIVE UNI PONTE VEDRA | 215 S OCEAN GRANDE DRIVE UNI | 215 S OCEAN GRANDE DRIVE UNI | 215 S OCEAN GRANDE DRIVE UNI PONTE VEDRA | | | | | | |
| Check "X" if Business | | | ! | | | | | | | |
| Name | LEE P McMASTER | LORETTA W McMASTER | CRAIG L McMASTER | BRIAN W MCMASTER | | | | | | |
| | - | 7 | က | 4 | 2 | 9 | 7 | 8 | 6 | 10 |

Part

| Expense Explanation Explanation | | | | | | | | | | |
|---------------------------------|---|---|---|---|---|---|---|---|---|--|
| Benefits | | : | | | | | | | | |
| Compensation | | | | | | | | | | |
| | - | 7 | က | 4 | 2 | 9 | 7 | 8 | စ | |

Part XV, Lines 1a-1b (990-PF) - Information Regarding Foundation Managers

| List Managers who contributed more than 2% of the total contributions received by the foundation | List Managers who own 10% or more of the stock of a corporation of which the foundation has a 10% or greater interest |
|--|---|
| 1 NONE | NONE |
| 2 | |
| 3 | |
| 4 | |
| 5 | |
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| 9 | |
| 10 | - |